FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

1. Corporatio	in Name	•••			
i Cellui	LAR PLUS OF TEXARK	ANA, INC.			
				I ARAN BINSKA NINA MANA BISIN KARAK NIAN BISIN	. ETEKN DIGAL EKBEL GEBUL BABIK 1884
<u> </u>					
Principal Plac	e of Business	Mailing Address		1 100 0 100 1 3 0 0 1 1 1 1 1 1 1 1	Q:Q \$ 0 0 0 0 0 0
429 S BEACH RD 429 S BEACH RD					
HOBE SOUND	D FL 33455	HOBE SOUND FL 33455		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	THOOFFICE
				05/29/1992	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		}	26		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0336554	60.75
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	e current year Intangible
24	25		30	Personal Property Tax due June 30.	☐ Yes 🔀 No
g, Name and Address of Current Registered Agent				10. Name and Address of New Registe	red Agent
DOMENCICH, THOMAS A 81 Nam				DOMENCICH, THON	UAS A
429 S BEACH RD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
HOBE SOUND FL 33455			45	29 S, DEACH RI	<u> </u>
			83		
			84 City	1	- 85 Zio Code
			/ //k	BE SOUND	FL 33455
11. Pursuant	to the provisions of Sections 60 sections	07.0502 and 607.1508, Florida Statute State of Florida, Such change was a	es, the above-named corp	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	se of changing its registered
agent. I a	m tamiliar with and accept the	oblightions of Section 697.0505, Flo	rida Statutes.	A	appointment as registered
SIGNATURE	_ / Louis	None Comment			16-98
4.	Signature, typed or printed name of regist		Registered Agent signature requir	ed when reinstating) DA	TE
12.	D	RS AND DIRECTORS DELETE	13. 1.1 TOTLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	DOMENCICH, THOMAS	- '' '	1.2 NAME		CT counting CT videorian
STREET ADDRESS	429 S BEACH RD	^	1.3 STREET ADDRESS		
CITY-ST-ZIP	HOBE SOUND FL		1.4 City-St-ZiP		
TITLE	HODE GOOND IE	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP			2 4 City-St-ZiP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

1-26-58

561-545-9571

FILED

Feb 06 1998 8:00am

Secretary of State